



**Ohio Children's Initiative Child and Adolescent  
Needs and Strengths (CANS)  
Information Technology System  
Assessor User Guide**

Governor Mike DeWine | Lt. Governor Jon Husted | Director Maureen Corcoran

**medicaid.ohio.gov**

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## Revision History

Date	Version #	Description
4/6/2022	1.0	Initial draft of the document. Final approved version.
5/5/2022	1.6	Updated figure 2 to include correct course name. Added note for what course certification numbers are acceptable for registration.
5/16/2022	1.7	Updated course list by adding note for needing booster if using CANS 1.0.
7/8/2022	1.8	Added note box for case number field.
11/18/2022	2.0	Section 7.1: Added third search option (c) to search for child/youth in custody and updated screenshots (Figures 11-14 and 18) to show the third option. Revised Step 33 text (pp. 29-30) re a pop-up in response to the submit button click for an OhioRISE Waiver youth and added Figure 29 screenshot of that pop-up.
3/2/2023	2.3	Added Pending Assessments tab to Section 5.3, updated screenshots, and reorganized chapters.

## Approval History

Date	Version #	Area
4/20/2022	1.0	ODM Strategic Initiatives.
2/27/2023	2.3	ODM Strategic Initiatives.

## Introduction

### What is the Ohio Children’s CANS Tool Initiative?

The Ohio Children’s Initiative Child and Adolescent Needs and Strengths (CANS) tool, developed with leadership from Governor DeWine’s Children’s Initiatives and Ohio’s child-serving state agencies, is being used by a wide variety of providers to inform care planning and decision making for children and adolescents with behavioral health needs. The Ohio Children’s Initiative CANS will also be used to establish eligibility for the new OhioRISE program. Certified Ohio Children’s Initiative CANS assessors are expected to use the CANS to gather all information about the child/youth and family story to describe their strengths and needs.

### What is the CANS Information Technology System?

The CANS Information Technology (IT) System:

- Documents CANS assessments and reassessments/updates with a youth/caregiver. Certified Ohio Children’s Initiative CANS assessors will register and use the system to document these assessments in a single location.
- Supports our cross-system goal of “One Child, One CANS” and ensures that youth/caregivers do not need to retell their stories.
- Improves care continuity and collaboration. Outputs/results are accessible to assessors and care team members, promoting cross-system coordination in real-time.
- Produces immediate Decision Support Model outputs, including care coordination and care recommendations.
- Records information about the child/youth and their caregiver(s) within one shared system.
- Monitors trends and outcomes to identify gaps and inform access and capacity improvement efforts.

# 1. How Do I Become a CANS Assessor?

## 1.1 Registration

You must have Ohio Children’s Initiative CANS certification to register in the CANS IT System and complete a CANS assessment with a child/youth. To become a certified Ohio Children’s Initiative CANS assessor, you must:

1. Complete CANS training with the Child and Adolescent Behavioral Health Center of Excellence (COE), which is responsible for providing statewide professional development activities related to the Ohio Children’s Initiative CANS assessment tool. Assessors must complete both the TCOM (Transformational Collaborative Outcomes Management) and Ohio Children’s Initiative CANS Comprehensive training with the COE.
  - If you were already certified in a previous version of the CANS, you will need to complete the new version of the TCOM and Ohio Children's Initiative CANS training sessions.
2. Register on the [Praed Foundation’s website](#) to complete the CANS Assessor certification exam and pass with a 70% or higher.
  - The COE will provide you with a coupon code to waive the cost of the exam after you have completed their training.
  - CANS training dates and additional information about the CANS training process are available to you here on the [OhioRISE webpage](#). Additional CANS training dates will be announced each month.

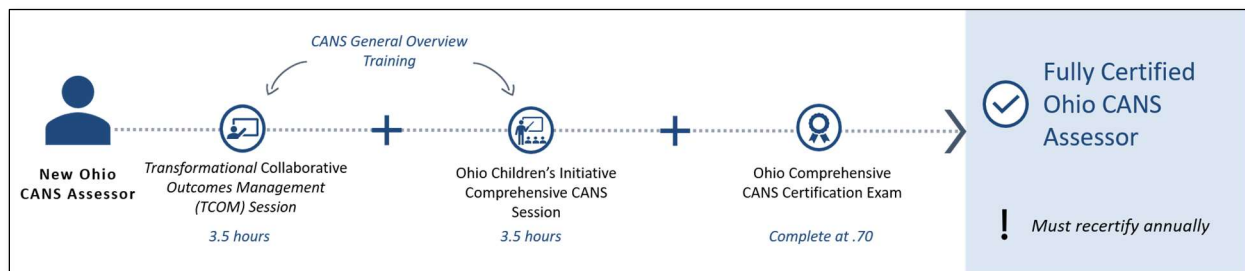


Figure 1 – Assessor Certification Overview

### Note:

A one-time self-registration process is required to use the CANS IT system.



## 2. How do I Register in the CANS IT System?

### 2.1 Steps to Self-Register

1. Gather the following necessary information: You will need your **Assessor ID** and **Praed Certification Number** to complete the self-registration. These numbers can be found on your Certificate of Completion provided to you by email from the Praed Foundation after your certification exam (0.70 score or higher). Please note that your **Praed Certification Number** does *NOT* include the letter “c” at the beginning.

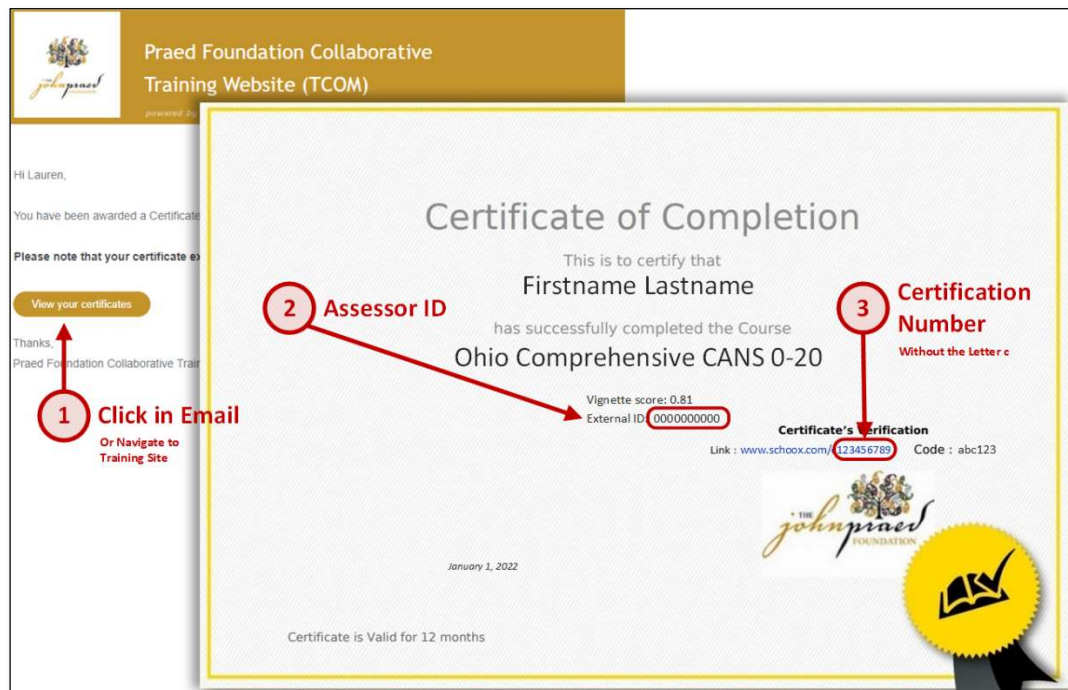


Figure 2 – Assessor ID and Certification Number Location

#### Note:

Please note that you will need to use your course certificate from one of the below courses and not individual live sessions, events and/or webinars.

- Ohio Comprehensive CANS 0-20
- Ohio Comprehensive CANS 0-20 Certification Test
- Ohio CANS 6-21 1.0 (If you have this certification, you must have also completed an Ohio Children's Initiative CANS Booster Training)

2. Open Chrome and enter the following address: <https://cans.medicaid.ohio.gov/login>.
3. Click the **Don't Have an Account? Click Here to Create One** button. The Assessor Registration Form page will be displayed.
4. Complete the form. Fields marked with the red asterisk (\*) are required.
5. Click the **Submit** button.

**OHIO GOVERNOR'S CHILDREN'S INITIATIVE**  
**CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)**

**ASSESSOR REGISTRATION**

**Personal Information**  
All fields indicated by "\*" are required.

\*Assessor ID (i.e. InSys, HCS ID, Staff ID or External ID) \*First Name \*Last Name  
Where to find this?

\*Prad Certification Number \*Provider NPI  
Where to find this?

\*Primary Practice Address

\*City \*State  
Ohio

\*Zip Code Country  
United States

\*County \*Are you multi lingual?  
Select Country Yes  
No

☐ I attest to having completed the Ohio Children's Initiative CANS training and to holding current Ohio Children's Initiative CANS certification at 70% or higher.

**Email Verification**  
A 6 digit PIN will be sent to your email address for verification purposes.

\*Email \*Please re-type your email  
email@example.com email@example.com

Ohio Department of Medicaid | 50 West Town Street, Suite 400, Columbus, Ohio 43215  
Consumer Hotline: 800-324-8680 | Provider Hotline: 800-686-1516

Figure 3 – Assessor Self-Registration Form

**Note:**

**Assessor ID** – Found on your Certificate of Completion.

**Prad Certification Number** – Does *NOT* include the letter “c” at the beginning.

**NPI Field** – Please provide an NPI number if you have one.

**Primary Practice Address Field** – Provide the address of the agency or entity for which you will primarily be completing the CANS Assessments.

6. The “Verify Email” pop-up will open on your screen. Check your email from CANS for the Verification Code and enter the code in the Verify Email page. You will have 15 minutes to enter the code and click the **Verify** button.

Be sure to check your spam or junk folders if you did not receive the email. If you do not receive your verification code or run out of time to enter your code, please go back to [step one](#) and repeat the process to obtain a new code to verify your email address.

Upon verification, a success message will be displayed, and you will receive an email containing your username and instructions to change your password.

7. Click the **Click here to Setup Password** link. The “Change Your Password” page will display.

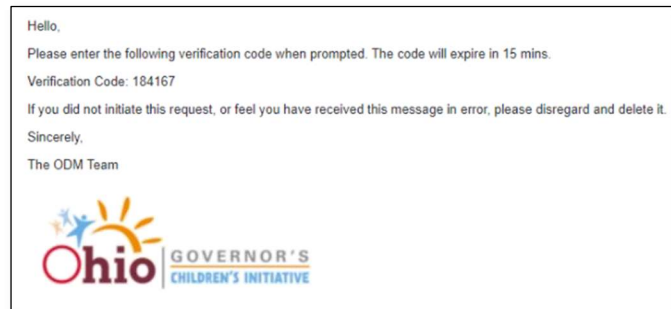


Figure 4 – Example of Verification Code Email

Figure 5 – Verify Email Address

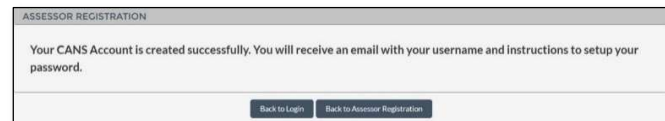


Figure 6 – Assessor Self-Registration Success Message

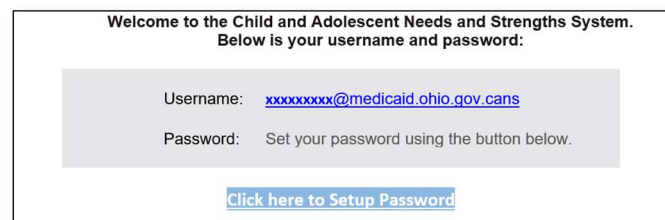
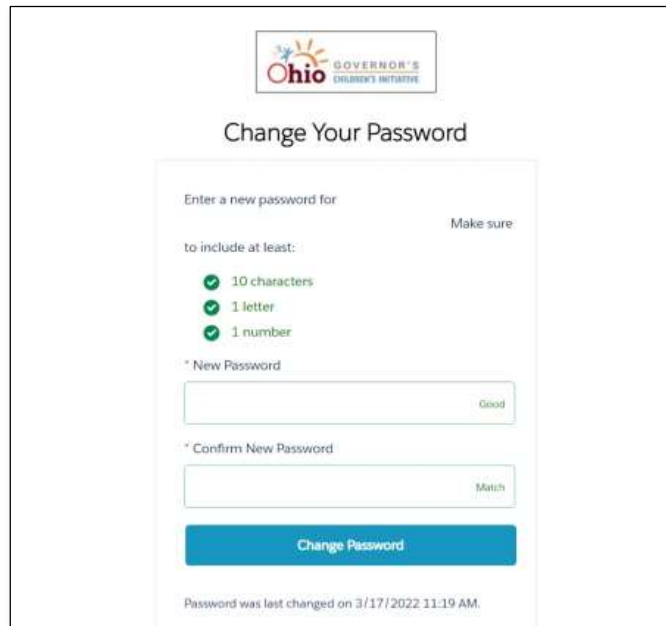


Figure 7 – Your Username and Instructions Email to Set Your Password

8. Enter and confirm a new password and click the **Change Password** button. Your password must contain:

- 10 characters
- 1 letter
- 1 number

The CANS Login page is displayed.



The screenshot shows a web form titled "Change Your Password" under the "Ohio GOVERNOR'S CHILDREN'S INITIATIVE" logo. The form includes a section for "Enter a new password for" with a "Make sure" label. Below this, it states "to include at least:" followed by three green checkmarks indicating requirements: "10 characters", "1 letter", and "1 number". There are two input fields: "\* New Password" and "\* Confirm New Password". The "New Password" field has a "Good" status indicator, and the "Confirm New Password" field has a "Match" status indicator. A blue "Change Password" button is at the bottom. At the very bottom, a small text line reads "Password was last changed on 3/17/2022 11:19 AM."

*Figure 8 – Change Your Password*

## 3. Getting Started in the CANS IT System

### Note:

The self-registration must be completed before you can log into the CANS IT system. See the section “[How Do I Self-Register in the CANS IT System?](#)”.

### 3.1 Logging In

1. Open Chrome and enter the following address:  
<https://cans.medicaid.ohio.gov/login>

You will be presented with the following Login page.

2. Enter your Username (this is your email followed by “.cans”) and your password, then check the Terms and Conditions box.

Ohio GOVERNOR'S CHILDREN'S INITIATIVE

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

Email

Password

☐ Yes, I have read the Terms and Conditions

Log in

Forgot your password?

Don't have an Account? Click here to create one

**Terms and Conditions:**

Whoever knowingly or intentionally accesses a computer or a computer system without authorization or exceeds the access to which that person is authorized, and by means of such actions, obtains, alters, damages, destroys, or discloses information, or prevents authorized use of the information operated by the State of Ohio, shall be subject to such penalties allowed by law. All activities on this system may be recorded and/or monitored. Individuals using this system expressly consent to such monitoring and evidence of possible misconduct or abuse may be provided to appropriate officials. Users who access this system consent to the provisions of confidentiality of the information being accessed, but have no expectation of privacy while using this system.

In the event that an unauthorized user is able to access information to which they are not entitled, the user should immediately notify the site administrator.

A CANS assessment must be completed in an ethical manner, and the CANS assessor must take all reasonable steps to appropriately minimize any potential conflicts of interest or biases, actual or perceived. A potential conflict of interest includes without limitation any interest (personal, professional, financial, or otherwise) that the assessor or their employer has that is inconsistent with, or in conflict with, or would compromise in any manner, the discharge and fulfillment of the assessor's responsibilities in conducting the assessment. If the assessor has or should reasonably have any concerns about appropriately minimizing potential conflicts or biases, actual or perceived, they must identify an alternative assessor who meets this standard in a manner that ensures the assessment is completed in a timely manner.

CANS assessors attest to having completed the Ohio Children's Initiative CANS training and to holding current Ohio Children's Initiative CANS certification at 70% or higher.

Ohio Department of Medicaid | 50 West Town Street, Suite 400, Columbus, Ohio 43215  
Consumer Hotline: 800-324-8680 | Provider Hotline: 800-686-1516

Figure 9 – CANS Login Page

3. Click the **Log in** button. The CANS Homepage is displayed.

Ohio GOVERNOR'S CHILDREN'S INITIATIVE

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

HOME SEARCH PENDING ASSESSMENTS MY PROFILE HELP

**WELCOME TO CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)**

The Ohio Children's Initiative Child and Adolescent Needs and Strengths (CANS) tool, developed with leadership from Governor DeWine's Children's Initiatives and Ohio's child-serving state agencies, is being used by a wide variety of providers to inform care planning and decision making for children and adolescents with behavioral health needs. The Ohio Children's Initiative CANS will also be used to establish eligibility for the new OhioRISE program. Certified Ohio Children's Initiative CANS assessors are expected to use the CANS to gather all information about the child/youth and family story to describe their strengths and needs.

The CANS Information Technology (IT) System:

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- Supports our cross-system goal of "ONE CHILD, ONE CANS" and ensures that youth / caregivers do not need to retell their stories.
- Improves care continuity and collaboration. Outputs/results are accessible to assessors and care team members, promoting cross-system coordination in real-time.
- Produces immediate Decision Support Model outputs, including care coordination and care recommendations.
- Records information about the child/youth and their caregiver(s) within one shared system.
- Track trends and outcomes to identify gaps and inform access and capacity improvement efforts.

Ohio Department of Medicaid | 50 West Town Street, Suite 400, Columbus, Ohio 43215  
Medicaid Call Center 800-686-1516 Select option 5 for assistance with CANS IT System  
Consumer Hotline: 800-324-8680 | Provider Hotline: 800-686-1516

Figure 10 – CANS Homepage

**Note:**

For password help, see the section [“Resetting Your Password”](#).

## 3.2 The CANS Homepage

This homepage contains welcome information and includes a menu with the following options.

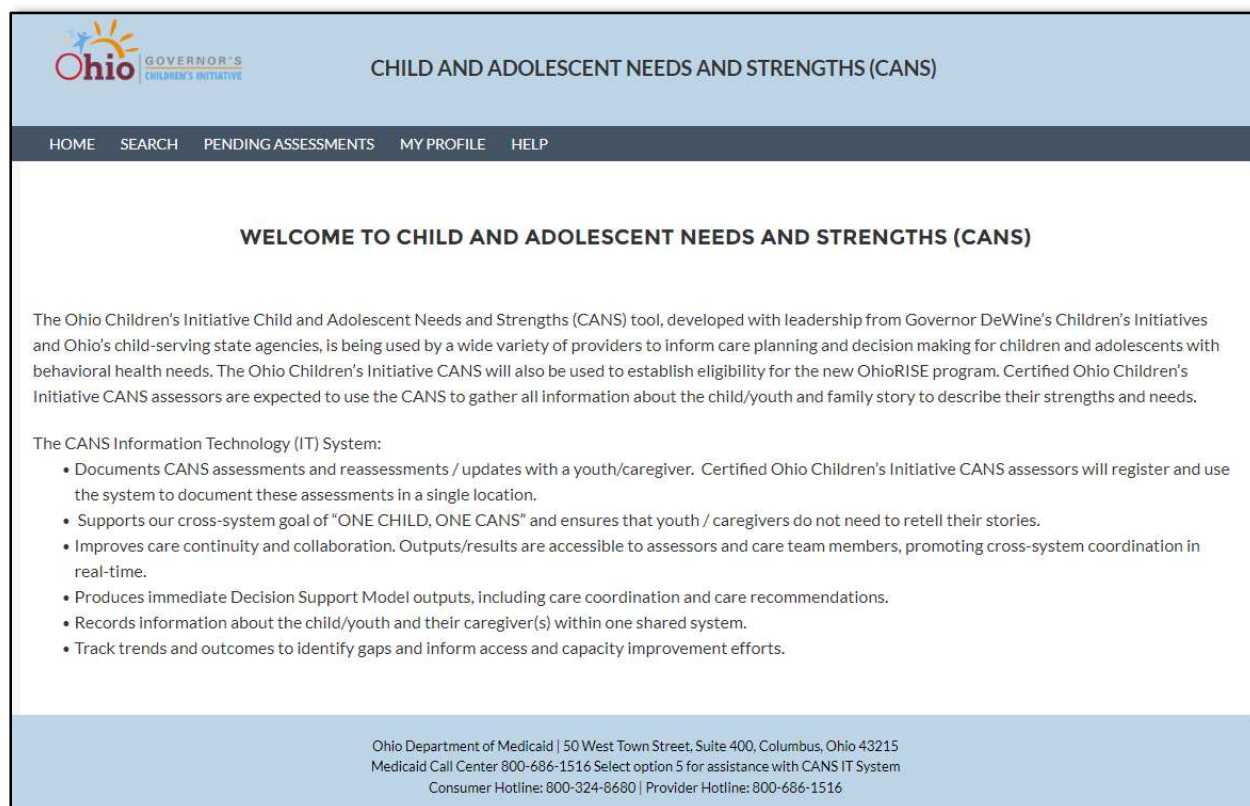


Figure 11 – CANS Homepage

Menu Item	Action or Description
HOME	The welcome page.
SEARCH	The page where you can search for a Child/Youth in the CANS IT system.
PENDING ASSESSMENTS	All the assessments that are in initiated and draft status.

Menu Item	Action or Description
<b>MY PROFILE</b>	Your account information (your information as an assessor). See the section <a href="#">“How can I View and Update My Profile?”</a> for more details.
<b>HELP</b>	Provides useful information about CANS.

*Table 1 – Homepage Menu Options*

## 4. Searching in the CANS IT System

### 4.1 Searching for a Child or Youth

1. From the CANS menu click the **SEARCH** option to begin the search process. Choose one of the three options (a, b, or c) to search for a Child/Youth:
  - a. If the Medicaid ID or SSN is known, then select the first search option and use a combination of (Medicaid ID or SSN) and (First Name or Last Name or Date of Birth) (Figure 12).

The screenshot displays the 'CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)' system interface. At the top, there is a navigation bar with 'HOME', 'SEARCH', 'PENDING ASSESSMENTS', 'MY PROFILE', and 'HELP'. The 'SEARCH' tab is active. Below the navigation bar, the 'SEARCH' section is titled 'CHILD/YOUTH INFORMATION SEARCH'. It includes a dropdown menu for 'Please select one of the following options:' with three radio button options: 'Search using a combination of (Medicaid ID or SSN) and (First Name or Last Name or Date of Birth)' (selected), 'Search using a combination of (First Name and Last Name) and Date of Birth and (County or Last 4 digit of SSN)', and 'Search for Youth In Custody'. Below these options, there are input fields for 'Medicaid ID' (containing '200000002184'), 'Social Security Number' (with a prompt 'Enter the 9 digit Social'), and a section for '(AND)' with fields for 'First Name' (containing 'Claribel'), 'Last Name' (containing 'Varrlano'), and 'Date of Birth' (with a calendar icon). At the bottom of the search section are 'Search' and 'Clear' buttons. The footer contains contact information for the Ohio Department of Medicaid.

Figure 12 – Search for a Child/Youth in CANS Option 1



- b. If the Medicaid ID and SSN are not known, then select the second option to search using a combination of (First Name and Last Name) and Date of Birth and (County or Last 4 digits of SSN) (Figure 13).


Figure 13 – Search for a Child/Youth in CANS Option 2

- c. This option is intended to be used for a Child/Youth in custody. If the Medicaid ID or SSN are known, then select the third option to search using a combination of (12-digit Medicaid ID or 9-digit SSN) and (First Name or Last Name or Date of Birth) (Figure 14).

Figure 14 – Search for a Child/Youth in CANS Option 3

- 2 Enter the required information on the screen and click the **Search** button.

The results will be displayed under the **Search** button.



CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

HOME
SEARCH
PENDING ASSESSMENTS
MY PROFILE
HELP

SEARCH

CHILD/YOUTH INFORMATION SEARCH

Please select one of the following options:

☐ Search using a combination of (Medicaid ID or SSN) and (First Name or Last Name or Date of Birth)
 ☐ Search using a combination of (First Name and Last Name) and Date of Birth and (County or Last 4 digit of SSN)
 ☒ Search for Youth in Custody

Medicaid ID

200000002184

(OR)

Social Security Number

Enter the 9 digit Social

(AND)

First Name

Claribel

(OR)

Last Name

Last Name

(OR)

Date of Birth

Search

Clear

First Name	Last Name	Medicaid ID	SSN	Date of Birth	Gender	Residence	Address	Child/Youth D...	Assessment(s)
Claribel	Varriano	200000002184	XXX-XX-2184	11/1/2010	Male	FRANKLIN	6 Harry L Dr #...	Info	View

Ohio Department of Medicaid | 50 West Town Street, Suite 400, Columbus, Ohio 43215  
 Medicaid Call Center 800-686-1516 Select option 5 for assistance with CANS IT System  
 Consumer Hotline: 800-324-8680 | Provider Hotline: 800-686-1516

*Figure 15 – Assessment Records for a Found Child/Youth*

**Note:**

Scroll down to see the rest of the page which may not be visible on your screen if there are multiple Child/Youth records. The page contains one or more buttons depending on the results found in the search.

## 4.2 Child/Youth Results Found

1. Click the **Info** button to display detailed information about the Child/Youth. You can review this information and close the pop-up when done.

Child/Youth Information	
<b>CHILD/YOUTH INFORMATION</b> Medical ID: 20000000224 First Name: Carter Middle Initial: Last Name: Hoffman Date of Birth: 11/1/2000 Gender: Male Race: Caucasian Address Line 1: 615 Perry Ln # 4037 Address Line 2: City: CHICAGO, IL State: IL Zip Code: 60623	SSN: XXX-XX-2234 Residence County: FRANKLIN Eligibility County: FRANKLIN Benefits Plan: I-MSO LIC Provider: Waiver Name: MCP Enrollment: Medicaid Managed Care Plan MCP Category: CTC MCP Plan Name: MCO/MSA OnsiteBSE Enrollment: OnsiteBSE Managed Care Plan OnsiteBSE Category: I-TH OnsiteBSE Plan Name: JETNA
<b>OnsiteBSE Eligibility</b> Medicaid Eligible: Yes OnsiteBSE Eligible: Yes OnsiteBSE Waiver Eligible: No Date of Enrollment: 2/15/2023 Date of Disenrollment:	OnsiteBSE Waiver Enrollment Date: Reassessment Date: 3/15/2023 OnsiteBSE Waiver Reassessment Date: OnsiteBSE Waiver Request Date:

Figure 16 – Detailed Information about a Child/Youth

2. Click the **View** button and pop-up will display information about the Child/Youth's assessment(s). This includes assessments in all statuses: **Initiated**, **Draft**, and **Completed**. You can have up to 5 interactive options on this page: **Close**, **View**, **Edit**, **Clone**, and **Create New**. See sections [Assessment Statuses](#) and [Assessment Buttons and Actions](#) for detailed descriptions.

CHILD/YOUTH INFORMATION

Name

Claribel Varriano

Date of Birth

Nov 1, 2010

Address

6 Harry L Dr #6327

City

COLUMBUS

State

OH

Zip Code

43223

Residence County

FRANKLIN

Eligibility County

FRANKLIN

Medicaid ID

200000002184

Social Security Number

XXX-XX-2184

Gender

Male

Ethnicity

Race

Caucasian

ASSESSMENTS

Create New

CANS Assessment(s)	Medicaid ID	Type of Request	Category	Assessment Type	Status	Outcome	Created Date	
CANS-A00010131	200000002184	Crisis	Initial	Brief	Completed	Enrolled	2/15/2023, 02:44 PM	<div>View</div>
CANS-A00010128	200000002184	PRTF			Completed	Enrolled	2/15/2023, 02:42 PM	<div>View</div>

Close

Figure 17 – Information about the Child/Youth Assessment(s)

- Click the **Edit**, **Clone**, or **Create New** button to show the Create Assessment screen. Continue to the “[How Do I Create a Child/Youth Assessment?](#)” in this document for more steps.

**OHIO GOVERNOR'S**  
CHILDREN'S INITIATIVE

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

HOME SEARCH PENDING ASSESSMENTS MY PROFILE HELP

**CREATE ASSESSMENT**

**ASSESSMENT INFORMATION**

\* Type of Request: Routine  
\* Assessment Category: Initial  
\* Assessment Type: Brief

\* Provider Type:  
☒ FCFC  
☐ DODO  
☐ MRSS  
☐ PRTF  
☐ QRTF  
☐ School-Based  
☐ Title IV-E Agency  
☐ CME  
☐ IHBT/MST/FFT  
☐ OHR Plan  
☐ ODJFS  
☐ Hospital  
☐ BH Provider  
☐ PCSA  
☐ DYS & Juvenile Justice  
☐ MCO

Additional Information  
☐ Is this assessment intended for QRTF?

**ASSESSOR INFORMATION**

Assessor ID: AID111111  
 Assessor Name: CANS Test Assessor User  
 \* Prad Certification No: CID111111  
 Provider NPI: 5677878996  
 \* Prad Agency Name: Abraxas Youth & Family Services - Ohio

**CHILD/YOUTH INFORMATION**

\* First Name: Claribel  
 Middle Initial:   
 \* Last Name: Varriano  
 \* Date of Birth: Nov 1, 2010  
 Case Number:   
 \* Address Line 1: 6 Harry L Dr #5327  
 Address Line 2:   
 \* City: COLUMBUS  
 \* State: OH  
 \* Zip Code: 43223  
 \* Residence County: FRANKLIN  
 Eligibility County: FRANKLIN  
 \* Medical ID: 200000002184  
 \* Social Security Number: XXX-XX-2184  
 Gender: Male  
 Ethnicity: Hispanic  
 Race: Caucasian  
 \* Grade: 3  
 Agency Name (If in Child Welfare custody):   
 Please Check All that Apply:  
☒ There is no possible community living arrangement for the youth that is willing and able to support the intensive community treatment (e.g., wraparound) for the youth given their current needs.  
☐ Youth was unsuccessful in intensive community treatment.  
☐ Youth is in custody of, or on parole with, the Department of Youth Services.

Begin & Save Close

Ohio Department of Medicaid | 50 West Town Street, Suite 400, Columbus, Ohio 43215  
 Medicaid Call Center: 800-686-1516 Select option 5 for assistance with CANS IT System  
 Consumer Hotline: 800-324-8680 | Provider Hotline: 800-686-1516

Figure 18 – Editing the Child/Youth’s Assessment and Personal Information

### 4.3 Child/Youth Not Found Results

If the Child/Youth is not found in the CANS or MITS systems, the following page is displayed.

1. Click the **Create Assessment** button to begin a new assessment for the Child/Youth and continue to the [“How Do I Create a Child / Youth Assessment?”](#) section for more information.

The screenshot displays the 'CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)' interface. At the top, there is a navigation bar with links: HOME, SEARCH, PENDING ASSESSMENTS, MY PROFILE, and HELP. Below this is a 'SEARCH' section titled 'CHILD/YOUTH INFORMATION SEARCH'. It includes three radio button options for search criteria: 'Search using a combination of (Medicaid ID or SSN) and (First Name or Last Name or Date of Birth)' (selected), 'Search using a combination of (First Name and Last Name) and Date of Birth and (County or Last 4 digit of SSN)', and 'Search for Youth in Custody'. Input fields are provided for Medicaid ID (containing '200000002181'), Social Security Number (with a prompt 'Enter the 9 digit Social'), First Name (containing 'Clar'), Last Name, and Date of Birth. 'Search' and 'Clear' buttons are at the bottom of the search area. A message states 'No records found. Please modify the input parameters and search again or create a CANS recipient by clicking on the button below.' with a 'Create Assessment' button. The footer contains contact information for the Ohio Department of Medicaid.

Figure 19 – Search Result – Child/Youth Not Found

## 5. How Do I Create a Child/Youth Assessment?

### 5.1 Types of Assessments that Can be Created

There are three ways you can get to the Create Assessment page: Edit, Clone, or Create New.

- **Edit:** An assessment that was started previously can be edited if it is in draft status (i.e., not submitted) by the assessor who created it.
- **Clone:** An existing assessment can be cloned as a basis for a new assessment. Routine or OhioRISE Waiver assessment types can be cloned after they have been submitted.
- **Create New:** A new assessment can be created at any time for a Child/Youth.

The fields in the Assessment Information section of the Create Assessment page will be different depending on your selections. Complete the following steps to create a Child/Youth assessment.

## 5.2 Creating an Assessment

### 1. Required assessment information:

- **Type of Request**
- **Assessment Category**
- **Assessment Type**
- **Provider Type**
- **Additional Information** box(es) if applicable.
- **Praed Agency Name**

### 2. Complete the **Child/Youth Information** section and check all the applicable boxes at the bottom of the page.

**CREATE ASSESSMENT**

**ASSESSMENT INFORMATION**

\* Type of Request: Select an Option

\* Provider Type:

- ☐ FCFE
- ☐ DODO
- ☐ MRSS
- ☐ PRFT
- ☐ QRTF
- ☐ School-Based
- ☐ Title IV-E Agency
- ☐ CME
- ☐ IHS/MT/FFT
- ☐ OHR Plan
- ☐ ODJFS
- ☐ Hospital
- ☐ BH Provider
- ☐ PCSA
- ☐ DYS & Juvenile Justice
- ☐ MCO

**ASSESSOR INFORMATION**

Assessor ID: AID111111 | Assessor Name: CANS Test Assessor User | \* Praed Certification No: CID111111 | Provider NPI: 5077878996

\* Praed Agency Name: Select an Option

**CHILD/YOUTH INFORMATION**

\* First Name: Jocelyn | Middle Initial: | \* Last Name: Humphrey | \* Date of Birth: Jan 1, 2013

Case Number: | \* Address Line 1: 1000 CHERRY WAY | Address Line 2: | \* City: MIAMISBURG

\* State: OH | \* Zip Code: 45342 | \* Residence County: MONTGOMERY | Eligibility County: MONTGOMERY

\* Medicaid ID: 200000000117 | \* Social Security Number: 1000-000-1117 | Gender: Female | Ethnicity: Select an Option

Race: Not Provided | \* Grade: Select an Option | Agency Name (if in Child Welfare custody):

Please Check All that Apply:

- ☐ There is no possible community living arrangement for the youth that is willing and able to support the intensive community treatment (e.g., wraparound) for the youth given their current needs.
- ☐ Youth was unsuccessful in intensive community treatment.
- ☐ Youth is in custody of, or on parole with, the Department of Youth Services.

**Begin & Save** **Close**

Figure 20 – Creating a Child/Youth Assessment – Brief

#### Note:

A **CME Provider Type** may complete a OhioRISE 1915(c) Waiver Request. Please select OhioRISE Waiver under **Type of Request** if you are a CME provider type and completing a CANS assessment to determine OhioRISE waiver eligibility.

Please see the definition tables for additional information about [Type of Request](#), [Assessment Category](#), [Assessment Type](#), [Provider Type](#), [Additional Information](#), [Praed Agency Name](#).

- Click **Begin & Save**. If a red error message is displayed on the left menu for any field, correct or complete the missing information and click **Begin & Save**. The following “Edit Assessment” page is displayed.

Select an Option ▼

Complete this field.

**Note:**

For **Case Number** field, enter Ohio Benefits or SACWIS case number (if known).

OHIO GOVERNOR'S INITIATIVE

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

HOME SEARCH PENDING ASSESSMENTS MY PROFILE HELP

EDIT ASSESSMENT

- CHILD/YOUTH INFO
- STRENGTHS ❌
- LIFE
- BEHAVIORAL ❌
- RISK BEHAVIOR ❌
- CULTURAL FACTORS
- TRAUMATIC/ADVERSE
- EARLY CHILDHOOD
- YOUTH
- CAREGIVER

**ASSESSMENT INFORMATION**

Type of Request  
Routine

Assessment Category  
Reassessment

Assessment Type  
Comprehensive

\* Provider Type

☐ PCFC  
☐ CME  
☐ PCSA  
☐ QRTP

☐ Title IV-E Agency  
☒ BH Provider  
☐ PRTF  
☐ ODJFS

☐ Hospital  
☐ MRSS  
☐ OHR Plan  
☐ MCO

☐ DODD  
☐ I-HBT/MST/FFT  
☐ DYS & Juvenile Justice  
☐ School-Based

Additional Information  
☐ Is this assessment intended for QRTP?

**ASSESSOR INFORMATION**

Assessor ID  
AID111111

Assessor Name  
CANS Test Assessor User

Pract Certification No  
CID111111

Provider NPI  
5677878996

Assessor Agency Name  
Abraxas Youth & Family Services - Ohio

**CHILD/YOUTH INFORMATION**

First Name  
Jocelyn

Middle Initial

Last Name  
Humphrey

Date of Birth  
Jan 1, 2013

Case Number

Address Line 1  
1000 CHERRY WAY

Address Line 2

City  
MIAMISBURG

State  
OH

Zip Code  
45342

Residence County  
MONTGOMERY

Eligibility County  
MONTGOMERY

Medicaid ID  
200000000117

Social Security Number  
XXXX-XX-1117

Gender  
Female

Ethnicity

Race  
Not Provided

Grade  
4

Agency Name (if in Child Welfare custody)

Please Check All that Apply:

☐ There is no possible community living arrangement for the youth that is willing and able to support the intensive community treatment (e.g., wraparound) for the youth given their current needs.

☐ Youth was unsuccessful in intensive community treatment.

☐ Youth is in custody of, or on parole with, the Department of Youth Services.

Tip: Please click the save button to save your changes before moving to the next section.

Save
Submit
Close

Ohio Department of Medicaid | 50 West Town Street, Suite 400, Columbus, Ohio 43215  
 Medicaid Call Center 800-686-1516 Select option 5 for assistance with CANS IT System  
 Consumer Hotline: 800-324-8680 | Provider Hotline: 800-686-1516

Figure 21 – Saved Information for Child/Youth – Comprehensive

**Note:**

Click the Save button in the “Edit Assessment” page to save the information on the current tab. **Each tab must be saved individually, or information may be lost.** When all the tabs are completed, click the **Submit** button on the last tab to finish the Child/Youth’s assessment.



4. Click **STRENGTHS** in the left tab menu.
5. Complete the **Strengths Domain** section. In the **Rationale** textbox, write an explanation that contains as much information as possible.
6. Click **Save**. When the page is saved, continue to the next tab.

The screenshot displays the 'EDIT ASSESSMENT' interface for the 'CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)' system. The left sidebar shows a tab menu with 'CHILD/YOUTH INFO', 'STRENGTHS', 'LIFE', 'BEHAVIORAL', 'RISK BEHAVIOR', 'CULTURAL FACTORS', 'TRAUMATIC/ADVERSE', 'EARLY CHILDHOOD', 'YOUTH', and 'CAREGIVER'. The 'STRENGTHS' tab is selected and highlighted with a red circle. The main content area is titled 'ASSESSMENT INFORMATION' and includes fields for Name (Jocelyn Humphrey), Age (10), Type of Request (Routine), Assessment Category (Reassessment), and Assessment Type (Comprehensive). Below this is the 'STRENGTHS DOMAIN (Ages 6+)' section, which provides instructions on how to use the categories and action levels (0-3). The domain is divided into two columns of rating scales: 'Family Strengths' and 'Community Life'. The 'Family Strengths' column includes Interpersonal, Optimism, Educational Setting, Vocational, Talents and Interests, and Spiritual/Religious. The 'Community Life' column includes Relationship Permanence, Resilience, Resourcefulness, Cultural Identity, Natural Supports, and Youth Involvement in Care. Each scale has a grid of buttons labeled 0, 1, 2, and 3. The 'Natural Supports' scale has a '3' selected. Below the scales is a text box for the 'Rationale' for Centerpiece (0) and Useful (1) Strengths, as well as Strengths to Build (2 or 3). A tip at the bottom states: 'Tip: Please click the save button to save your changes before moving to the next section.' At the bottom right are 'Save', 'Submit', and 'Close' buttons. The footer contains contact information for the Ohio Department of Medicaid.

Figure 22 – STRENGTHS Tab – Comprehensive

**Note:**

Not all the domains/tabs are required for every Child/Youth, depending on their age. If a tab is not required for the Child/Youth you are assessing, move to the next tab.

7. Click **LIFE** in the left tab menu.
8. Complete the **Life Functioning Domain** section. In the **Rationale** textbox, write an explanation that contains as much information as possible.
9. Click **Save**. When the page is saved, continue to the next tab.

The screenshot shows the 'CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)' interface. The left sidebar has tabs for CHILD/YOUTH INFO, STRENGTHS, LIFE, BEHAVIORAL, RISK BEHAVIOR, CULTURAL FACTORS, TRAUMATIC/ADVERSE, EARLY CHILDHOOD, and CAREGIVER. The 'LIFE' tab is selected. The main area is titled 'EDIT ASSESSMENT' and contains the 'ASSESSMENT INFORMATION' section with fields for Name (Jocelyn Humphrey), Age (10), Type of Request (Routine), Assessment Category (Initial), and Assessment Type (Brief). Below this is the 'LIFE FUNCTIONING DOMAIN (Ages 6+)' section. It includes a legend for Needs Domains (0-3) and a grid of rating scales for various domains: Family Functioning, Sleep, School, Legal, 14+ Medication Adherence, Living Situation, Social Functioning, Developmental/Intellectual (A), Decision Making, and Medical/Physical. A text box for 'Rationale' is provided at the bottom. A tip at the bottom states: 'Tip: Please click the save button to save your changes before moving to the next section.' Buttons for 'Save', 'Submit', and 'Close' are at the bottom right.

Figure 23 – LIFE Tab – Brief

10. Click **BEHAVIORAL** in the left tab menu.
11. Complete the **Behavioral/ Emotional Needs Domain** section. In the **Rationale** textbox, write an explanation that contains as much information as possible.
12. Click **Save**. When the page is saved, continue to the next tab.

The screenshot shows the 'CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)' interface. The left sidebar has tabs for CHILD/YOUTH INFO, STRENGTHS, LIFE, BEHAVIORAL, RISK BEHAVIOR, CULTURAL FACTORS, TRAUMATIC/ADVERSE, EARLY CHILDHOOD, and CAREGIVER. The 'BEHAVIORAL' tab is selected. The main area is titled 'EDIT ASSESSMENT' and contains the 'ASSESSMENT INFORMATION' section with fields for Name (Jocelyn Humphrey), Age (10), Type of Request (Routine), Assessment Category (Initial), and Assessment Type (Brief). Below this is the 'BEHAVIORAL/EMOTIONAL NEEDS DOMAIN (Ages 6+)' section. It includes a legend for Needs Domains (0-3) and a grid of rating scales for various domains: Psychosis (Thought Disorder), Impulsivity/Hyperactivity, Depression, Anxiety, Oppositional Behavior, Conduct (Antisocial Behavior), Adjustment to Trauma (B), Anger Control, Substance Use (C), Eating Disturbances, Attachment Difficulties, Behavioral Regressions, Somatization, and 14+ Interpersonal Problems. A text box for 'Rationale' is provided at the bottom. A tip at the bottom states: 'Tip: Please click the save button to save your changes before moving to the next section.' Buttons for 'Save', 'Submit', and 'Close' are at the bottom right.

Figure 24 – BEHAVIORAL Tab – Brief

13. Click **RISK BEHAVIORS** in the left tab menu.

14. Complete the **Risk Behaviors Domain** section. In the **Rationale** textbox, write an explanation that contains as much information as possible.

15. Click **Save**. When the page is saved, continue to the next tab.

The screenshot shows the 'EDIT ASSESSMENT' page for the 'RISK BEHAVIORS' tab. The left sidebar has tabs for CHILD/YOUTH INFO, STRENGTHS, LIFE, BEHAVIORAL, RISK BEHAVIOR (selected), CULTURAL FACTORS, TRAUMATIC/ADVERSE, EARLY CHILDHOOD, and CAREGIVER. The main content area is titled 'ASSESSMENT INFORMATION' and includes fields for Name (Jocelyn Humphrey), Age (10), Type of Request (Routine), Assessment Category (Initial), and Assessment Type (Brief). Below this is the 'RISK BEHAVIORS DOMAIN (Ages 6+)' section. It contains a table of risk factors with rating scales from 0 to 3. The factors are: Suicide Risk (0, 1, 2, 3), Non-Suicidal Self-Injurious Behavior (0, 1, 2, 3), Other Self-Harm (Racklessness) (0, 1, 2, 3), Danger to Others (I) (0, 1, 2, 3), Delinquent Behavior (I) (0, 1, 2, 3), Runaway (G) (0, 1, 2, 3), Intentional Misbehavior (0, 1, 2, 3), Fire Setting (H) (0, 1, 2, 3), Victimization/Exploitation (I) (0, 1, 2, 3), and Sexually Problematic Behavior (I) (0, 1, 2, 3). A text box for 'Please write a rationale for any item in the Risk Behavior Domain and related modules rated actionable (2 or 3)' is present. At the bottom, there are 'Save', 'Submit', and 'Close' buttons. A footer contains contact information for the Ohio Department of Medicaid.

Figure 25 – RISK BEHAVIORS Tab – Brief

16. Click **CULTURAL FACTORS** in the left tab menu.

17. Complete the **Cultural Factors Domain** section. In the **Rationale** textbox, write an explanation that contains as much information as possible.

18. Click **Save**. When the page is saved, continue to the next tab.

The screenshot shows the 'EDIT ASSESSMENT' page for the 'CULTURAL FACTORS' tab. The left sidebar has tabs for CHILD/YOUTH INFO, STRENGTHS, LIFE, BEHAVIORAL, RISK BEHAVIOR, CULTURAL FACTORS (selected), TRAUMATIC/ADVERSE, EARLY CHILDHOOD, and CAREGIVER. The main content area is titled 'ASSESSMENT INFORMATION' and includes fields for Name (Jocelyn Humphrey), Age (10), Type of Request (Routine), Assessment Category (Initial), and Assessment Type (Brief). Below this is the 'CULTURAL FACTORS DOMAIN (All Ages. For Children birth thru age 5, rate this section for the family)' section. It contains a table of cultural factors with rating scales from 0 to 3. The factors are: Cultural Stress (0, 1, 2, 3) and Cultural Diff. within the Family (0, 1, 2, 3). A text box for 'Please write a rationale for any item in the Cultural Factors Domain rated actionable (2 or 3)' is present. At the bottom, there are 'Save', 'Submit', and 'Close' buttons. A footer contains contact information for the Ohio Department of Medicaid.

Figure 26 – CULTURAL FACTORS Tab – Brief

19. Click **TRAUMATIC/ADVERSE** in the left tab menu.

20. Complete the **Traumatic/Adverse Childhood Experiences – Lifetime Exposure Domain** section. In the **Rationale** textbox, write an explanation that contains as much information as possible.

21. Click **Save**. When the page is saved, continue to the next tab.

Figure 27 – TRAUMATIC/ADVERSE Tab – Brief

22. Click **EARLY CHILDHOOD** in the left tab menu.

23. Complete the **EARLY CHILDHOOD DOMAIN** for Child/Youth aged 0-5 only.

24. Click **Save**. When the page is saved, continue to the next tab.

Figure 28 – EARLY CHILDHOOD Tab – Brief

25. Click **CAREGIVER** in the left tab menu.

26. This page has two selection boxes: **No Viable Caregiver Identified** and **Add Caregiver Information** under the “Caregiver Resources & Needs Domain” section.

### No Viable Caregiver Identified

If you select the **No Viable Caregiver Identified** box, the **Add Caregiver Information** button disappears. Select this option if there is no one that fills this role for the Child/Youth’s life.

### Add Caregiver Information

This option allows you to identify a caregiver. Complete the “Caregiver Information” pop-up and click the **Save** button. You can add multiple caregivers to this assessment, but only one Primary Caregiver. Example of caregivers could be **Bio Parent, Kinship Caregiver, Foster Parent, Natural Supports**, or others.

27. Click the **Save** button.

28. When all completed sections are saved click the **Submit** button.

- If it is an OhioRISE Waiver assessment, a “Ready to Submit” pop-up will appear with a date field and checkboxes.
- Click **Confirm** to submit or **cancel** to close the pop-up.
- If it is **not** an OhioRISE Waiver assessment, a confirmation success message will be displayed.

In either case (a or b) you will be presented with a page showing the entire assessment information for the Child/Youth (shown below) with recommendations and/or outcomes.

The screenshot shows the 'CAREGIVER' tab in the 'CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)' system. The left sidebar has tabs for CHILD/YOUTH INFO, STRENGTHS, LIFE, BEHAVIORAL, RISK BEHAVIOR, CULTURAL FACTORS, TRAUMATIC ADVERSITY, EARLY CHILDHOOD, and CAREGIVER. The main area is titled 'ASSESSMENT INFORMATION' and contains fields for Name (Jocelyn Humphrey), Age (10), Type of Request (Routine), Assessment Category (Initial), and Assessment Type (Brief). Below this is the 'CAREGIVER RESOURCES & NEEDS DOMAIN (All Ages)' section, which includes a 'No Viable Caregiver Identified' toggle switch. A tip at the bottom says 'Please click the save button to save your changes before moving to the next section.' There are 'Save', 'Submit', and 'Close' buttons at the bottom.

Figure 29 – CAREGIVER Tab – Brief

The screenshot shows the 'CAREGIVER INFORMATION' pop-up form. It has fields for First Name (Rob), Last Name (Bellonte), Relationship (Step father), and Email (email@address.com). There are checkboxes for 'Is Primary' and 'Kinship Caregiver (relationship)'. A Phone Number field is also present. Below these are several rating scales from 0 to 3 for Substance Use, Developmental, Safety, Caregiver Post, Supervision, Knowledge, Family Stress, and Residential Stability. At the bottom are 'Cancel' and 'Save' buttons.

Figure 30 – Caregiver Information Pop-up – Brief

The screenshot shows a 'Ready to Submit' pop-up for an OhioRISE Waiver Assessment. It includes instructions to review information and make final changes before submitting. It shows the OhioRISE Waiver Request Date as Nov 14, 2022. Below this are checkboxes for eligibility requirements: 'Child/Youth has a documented applicable Serious Emotional Disturbance diagnosis', 'Child/Youth has a need for at least one of the waiver services available through the OhioRISE 1915(c) waiver', 'Child/Youth has at least one of the required functional limitations outlined in OAC 5160-59-04, as documented in the CANS or through other documentation', and 'Child/Youth resides or will soon (within the next 90 days) reside in a family/caregiver home or other private residence in the community'. At the bottom are 'Confirm' and 'Cancel' buttons.

Figure 31 – OhioRISE Waiver Assessment Pop-up

Alternatively, you can print or create a PDF of the assessment by clicking the **Print** button.

Figure 32 –Assessment Print Menu

The screenshot below is an example of the completed assessment in view mode. It shows the top portion of the view that contains the recommendation information. Scrolling down the page will show the values and rationales entered in the assessment.

Figure 33 – Recommendations or Assessment Record – Brief

## 5.3 Viewing Pending Assessments



Figure 34 – CANS Homepage Pending Assessments Tab

Pending Assessment	Description
<b>Draft</b>	The demographic information is complete, but the individual sections of the assessment are not. You can edit an assessment that you initiated with this status to pick up where you left off.
<b>Initiated</b>	An assessment that was started but the demographic information is not complete. You can edit an assessment that you initiated with this status to pick up where you left off.
<b>Pending</b>	All assessments that are in initiated and draft status.

Table 2 – Pending Assessment Description

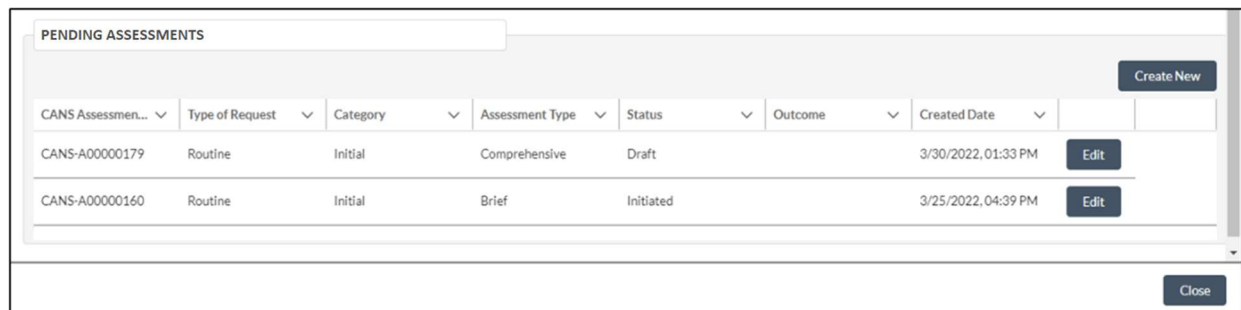


Figure 35 – Pending Assessment Pop-up



## 5.4 Buttons and Actions

Button	Description
<b>Clone</b>	Creates a new assessment with all fields and values copied from the assessment. This option is available for Routine or OhioRISE Waiver assessments that are in submitted status.
<b>Close</b>	Review the Child/Youth's assessment(s) information and close the pop-up.
<b>Create</b>	Start a new assessment for the Child/Youth. Your action will display the "Create Assessment" page (see the section " <a href="#">How do I create a Child/Youth Assessment?</a> " for more details).
<b>Edit</b>	Displays the "Create Assessment" page where you can pick up where you left off in a previous session.
<b>View</b>	Displays the Child/Youth's assessment information.

*Table 3 – Assessment List Buttons*

**Note:**

When using the Clone feature in the CANS IT System, please carefully review each item and rating to confirm that the rating is still relevant. This feature was developed to ensure that assessors are building upon what is already known about the youth/caregiver strengths and needs and to support One Child, One CANS. Assessors are responsible for ensuring the information is current and accurate.



## 6. Type, Category, and Status

### 6.1 Assessment Category

Assessment Category	Description
<b>Change in Circumstance</b>	Done if there is a change in the Child/Youth's situation. May be selected for Routine or OhioRISE Waiver request types.
<b>Discharge</b>	Determines if a Child/Youth should be disenrolled from the OhioRISE program. May be selected for Routine or OhioRISE Waiver request types.
<b>Initial</b>	The first known assessment for a Child/Youth. May be selected for Routine, OhioRISE Waiver, or Crisis request types.
<b>Reassessment</b>	A follow-up assessment, which may be required at regular intervals. May be selected for Routine or OhioRISE Waiver request types.

Table 4 – Assessment Category Definitions

### 6.2 Assessor Type

Type of Request	Description
<b>Crisis</b>	Selected by MRSS team.
<b>IP Psych</b>	This type of request is selected if the youth is admitted to or recently discharged from an inpatient psychiatric hospital or general hospital with a behavioral health primary diagnosis.
<b>OhioRISE Waiver</b>	An assessor employed by or affiliated with a CME may select this option to submit OhioRISE Waiver requests.
<b>PRTF</b>	Selected if the youth is admitted to or recently discharged from a psychiatric residential treatment facility.
<b>Routine</b>	The most common type of request, which should be selected when an assessor is working with the youth/caregiver to complete an assessment.

Table 5 – Type of Request Definitions

### 6.3 Assessment Type

Assessment Type	Description
<b>Brief</b>	<p>An abbreviated version of the CANS tool that may be selected for Routine or Crisis request types.</p> <p>The brief assessment type is required for Crisis request types.</p>
<b>Comprehensive</b>	<p>The full-length version of the CANS assessment which may be selected for most request types. The comprehensive CANS tool contains sub-modules that are triggered by actionable ratings on certain items. These modules dig deeper into the strengths and needs of the youth/caregiver and aid in care planning.</p> <p>The comprehensive type is required for OhioRISE Waiver request types.</p>

Table 6 – Assessment Type Definitions

### 6.4 Assessment Statuses

Status	Description
<b>Draft</b>	The demographic information is complete, but the individual sections of the assessment are not. You can edit an assessment that you initiated with this status to pick up where you left off.
<b>Initiated</b>	This is an assessment that was started but the demographic information is not complete. You can edit an assessment that you initiated with this status to pick up where you left off.
<b>Submitted</b>	This is an assessment that has been fully completed and submitted. It cannot be edited.

Table 7 – Assessment Statuses

### 6.5 Other Important Assessment Definitions

Assessment Type	Description
<b>Additional Information</b>	Select the boxes/circumstances, if applicable.
<b>Praed Agency Name</b>	Name of the agency you entered when registering with the Praed Foundation for Ohio Children’s Initiative CANS certification. If you need to update or change your Praed Agency name, you must update through the <a href="#">Praed Foundation’s website</a> .

Table 8 – Other Important Assessment Definitions

## 6.6 Provider Type

Provider Type	Description
<i>Check all that apply. May select more than one.</i>	
<b>BH Provider</b>	A behavioral health provider.
<b>CME</b>	An employee of a designated Care Management Entity (CME).
<b>DODD</b>	An employee or delegate of a State or County Department of Developmental Disabilities.
<b>DYS and Juvenile Justice</b>	An employee of Department of Youth Service or a Juvenile Justice Agency/Organization
<b>FCFC</b>	An employee/coordinator for a Family and Children First Council.
<b>Hospital</b>	A hospital provider.
<b>IHBT</b>	An Intensive Home-Based Treatment (IHBT) provider.
<b>MCO</b>	An employee of a Medicaid Managed Care Organization. (MCO).
<b>MRSS</b>	An employee of a Mobile Response and Stabilization Services (MRSS).
<b>ODJFS</b>	A state or county Ohio Department of Job and Family Services (JFS) employee.
<b>OHR Plan</b>	An employee/assessor of the OhioRISE plan.
<b>PCSA</b>	A county Public Children Services Agency (PCSA) employee or if you are doing a CANS assessment on behalf of a PCSA.
<b>PRTF</b>	Select if a youth is admitted to or recently discharged from a Psychiatric Residential Treatment Facility. (PRTF). Please be sure to verify and enter an accurate admission date.
<b>QRTP</b>	Select if you are completing a CANS assessment for Qualified Residential Treatment Program (QRTP) purposes.
<b>School-Based</b>	A school-based provider or are assessing in a school setting.
<b>Title IV-E Agency</b>	An employee of or assessing on behalf of a Title IV-E agency (including IV-E courts and PCSAs).

Table 9 – Provider Type Definitions



## 7. Definitions and Acronyms

Term	Definition
<b>Assessor</b>	An individual who works with the youth/caregiver and others to complete the CANS assessment. The assessor is responsible for entering assessments into the CANS IT System.
<b>Assessor ID</b>	Credential used by an assessor to self-register in the CANS IT system. To locate your assessor ID, please see the section " <a href="#">How Do I Self-Register in CANS?</a> ".
<b>CANS</b>	<u>C</u> hild and <u>A</u> dolescent <u>N</u> eeds and <u>S</u> trengths.
<b>CME</b>	<u>C</u> are <u>M</u> anagement <u>E</u> ntity.
<b>CABH-COE</b>	<u>C</u> hild and <u>A</u> dolescent <u>B</u> ehavioral <u>H</u> ealth <u>C</u> enter of <u>E</u> xcellence.
<b>NPI</b>	<u>N</u> ational <u>P</u> rovider <u>I</u> dentification.
<b>OhioRISE</b>	<u>R</u> esilience through <u>I</u> ntegrated <u>S</u> ystems and <u>E</u> xcellence. A Medicaid managed care program for children and adolescents with behavioral health needs.
<b>OhioRISE 1915(c) Waiver</b>	Provides additional services and support to its enrollees that are not otherwise covered under the state plan and provides an opportunity for youth with serious emotional disturbances and functional limitations who would otherwise require institutionalization.
<b>Praed Certification Number</b>	A number needed to self-register in the CANS IT system. To locate your assessor ID, please see the section " <a href="#">How Do I Self-Register in CANS?</a> ".
<b>Praed Foundation</b>	A nonprofit foundation that certifies assessors and holds the copywrite to the CANS assessment. Founded by Dr. John Lyons, whose team was instrumental in assisting the state in the development of the Ohio Children's Initiative CANS tool and Decision Support Model.
<b>SSN</b>	<u>S</u> ocial <u>S</u> ecurity <u>N</u> umber.
<b>TCOM</b>	<u>T</u> ransformational Collaborative <u>O</u> utcomes <u>M</u> anagement. A conceptual framework for managing systems, organizations, and programs whose mission is to help people change their lives in some important way.
<b>Username</b>	Email used to register, followed by ".cans".

Table 10 – Definitions and Acronyms

## 8. Tips and Helpful Information

### 8.1 Useful Hints

- Chrome (latest stable version) is the recommended browser for the CANS IT system. For the best experience use a desktop or laptop computer instead of a phone or tablet.
- When receiving emails from the system check your junk/spam folders.
- Hover your mouse on the **info**  icon for helpful information about the field.
- Click the **calendar**  icon to select a date.
- Fields marked with a red asterisk (\*) are required.
- **Cancel** vs. **Clear** vs. **Close**:
  - **Cancel** – ends your session and return you to the previous page.
  - **Clear** – erases data you entered on the page, allowing you to re-enter new data.
  - **Close** – exits the window or pop-up without saving your changes.

## 9. Troubleshooting

You can click the **Forgot Your Password?** button on the Login page to reset your password.

### 9.1 Resetting Your Password

1. Click the **Forgot Your Password?** Button on the “Log In” page.

Ohio GOVERNOR'S CHILDREN'S INITIATIVE

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

Email

Password

☐ Yes, I have read the Terms and Conditions

Log In

Forgot your password? Don't have an Account? Click here to create one.

**Terms and Conditions:**

Whoever knowingly or intentionally accesses a computer or a computer system without authorization or exceeds the access to which that person is authorized, and by means of such access, obtains, alters, damages, destroys, or discloses information, or prevents authorized use of the information operated by the State of Ohio, shall be subject to such penalties allowed by law. All activities on this system may be recorded and/or monitored. Individuals using this system expressly consent to such monitoring and evidence of possible misconduct or abuse may be provided to appropriate officials. Users who access this system consent to the provisions of confidentiality of the information being accessed, but have no expectation of privacy while using this system.

In the event that an unauthorized user is able to access information to which they are not entitled, the user should immediately notify the site administrator.

A CANS assessment must be completed in an ethical manner, and the CANS assessor must take all reasonable steps to appropriately minimize any potential conflicts of interest or biases, actual or perceived. A potential conflict of interest includes without limitation any interest (personal, professional, financial, or otherwise) that the assessor or their employer has that is incompatible with, or in conflict with, or would compromise in any manner, the discharge and fulfillment of the assessor's responsibilities in conducting the assessment. If the assessor has or should reasonably have any concerns about appropriately minimizing potential conflicts or biases, actual or perceived, they must identify an alternative assessor who meets this standard in a manner that ensures the assessment is completed timely manner.

CANS assessors attest to having completed the Ohio Children's Initiative CANS training and to holding current Ohio Children's Initiative CANS certification at 70% or higher.

Ohio Department of Medicaid | 50 West Town Street, Suite 400, Columbus, Ohio 43215  
Consumer Hotline: 800-324-8680 | Provider Hotline: 800-686-1516

Figure 36 – Login Page for Forgot Password

2. Enter in your Username and click the **Reset Password** button.

Ohio GOVERNOR'S CHILDREN'S INITIATIVE

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

**PASSWORD RESET**

To reset your password, we'll need your username. (Please note that your username is different from your email address.) We'll send password reset instructions to the email address associated with your account.

Username

Reset Password

Cancel

Ohio Department of Medicaid | 50 West Town Street, Suite 400, Columbus, Ohio 43215  
Consumer Hotline: 800-324-8680 | Provider Hotline: 800-686-1516

Figure 37 – Password Reset Username Entry Page

3. The system will send you an email with a link to reset your password. Find this email and click the link. Be sure to check your spam or junk folders if you did not receive the email.

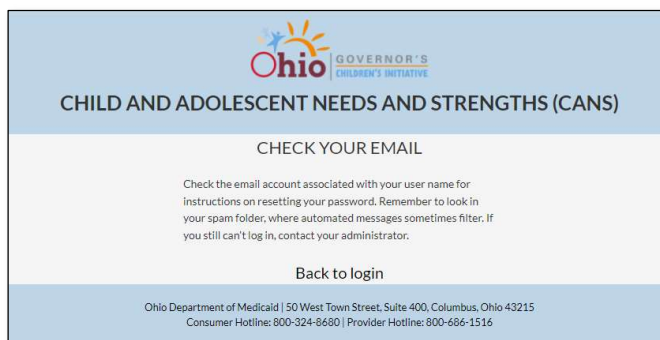


Figure 38 – Password Reset Check Your Email

4. Enter and confirm a new password and click the **Change Password** button. Your password must contain:
  - 10 characters
  - 1 letter
  - 1 number

Figure 39 – Password Reset Page

## 9.2 Viewing or Changing Your Profile

1. Click **MY PROFILE** in the CANS menu bar to display your profile information.
2. Click the **Edit** button.
3. You are only allowed to make changes to certain fields. When finished, click the **Update** button.
4. Click the **Update** button so that your profile will be saved.

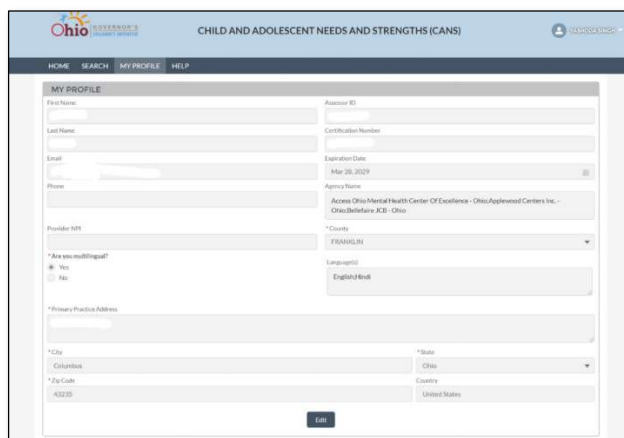


Figure 40 – Your Profile



Figure 41 – Edit Your Profile

### Note:

The following fields can be edited using the CANS IT System:

**Provider NPI, County, Are you Multilingual? Primary Practice Address, City State, Zip Code.** In order to change other fields please visit the Praed Foundation training site or email [support@tcomtraining.com](mailto:support@tcomtraining.com) for assistance.